## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

8733.1043.00-45

| CLAIMS AS FILED - PART I  |  |  |                   |                                       |                        |                                  |    | SMALL ENTITY |                        |             | OTHER THAN     |                        |  |
|---|--|--|-------------------|---------------------------------------|------------------------|----------------------------------|----|--------------|------------------------|-------------|----------------|------------------------|--|
|   | · · · · · ·                                    | ·  | (Colum            | (Column·1)                            |                        | (Column 2)                       |    | TYPE         |                        | OR          | OR SMALL ENTIT |                        |  |
| TOTAL CLAIMS  |  |  | 20                | .20                                   |                        |                                  |    | RATE         | FEE                    | ٦ ً         | RATE           | FEE                    |  |
| FOR   |  |  | NUMBER FILED      |                                       | NUMBER EXTRA           |                                  |    | BASIC FE     | E 385.00               | OR          | BASIC FEE      | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |  | 20 minus 20=      |                                       | * P                    |                                  | ·  | X\$ 9=       | 1                      | OR          | X\$18=         |                        |  |
| INI   | DEPENDENT (                                    | CLAIMS                                     | 3 minus 3 =       |                                       | * Ø                    |                                  | ·  | X43=         |                        | OR          |                |                        |  |
| М   | JLTIPLE DEPE                                   | NDENT CLAIM F                              | RESENT            |                                       |                        |                                  |    | . 1 45       | <del> </del>           | 7           |                |                        |  |
| * 11  | the difference                                 | e in column 1 is                           | less than z       | ero, enter                            | "0" in c               | column 2                         |    | +145=        |                        | OR          | L              | 777 0                  |  |
|   | CLAIMS AS AMENDED - PART II                    |  |                   |                                       |                        |                                  |    | TOTAL        |                        | OR          | TOTAL          | THAN                   |  |
| ·   | <del>,</del>                                   | (Column 1)                                 |                   | (Column 2) (Column 3)                 |                        |                                  | _  | SMALL        | ENTITY                 | OR          | SMALL          |                        |  |
| AMENDMENT A   | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                   | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ER<br>USLY             | PRESENT<br>EXTRA                 |    | RATE         | ADDI-<br>TIONAL<br>FEE |             | RATE           | ADDI-<br>TIONAL<br>FEE |  |
|   | Total .  | *  | Minus             | **                                    |                        | =                                |    | X\$ 9=       | ·                      | OR          | X\$18=         |                        |  |
| AME   | Independent                                    | *  | Minus             | ***                                   | 21 12 12 1             | =                                |    | X43=         |                        | OR          | X86=           |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |  |                   |                                       |                        |                                  |    | +145=        |                        | OR          | +290=          |                        |  |
|   |  |  | •                 |                                       |                        |                                  | L  | TOTAL        |                        |             | TOTAL          |                        |  |
|   |  | (Column 1)                                 |                   | (Calum                                | - O\                   | (Calumin 0)                      | A  | DDIT. FEE    |                        | <b>J</b> O. | ADDIT. FEE     |                        |  |
|   |  | CLAIMS                                     |                   | (Colum                                |                        | (Column 3)                       |    |              |                        |             |                |                        |  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT            |                   | NUMBI<br>PREVIOU<br>PAID F            | ER<br>JSLY             | PRESENT<br>EXTRA                 |    | RATE         | ADDI-<br>TIONAL<br>FEE |             | RATE           | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *  | Minus             | **                                    |                        | -                                |    | X\$ 9=       |                        | OR          | X\$18=.        |                        |  |
| AME   | Independent                                    | *  | Minus             | ***                                   |                        | -                                |    | X43=         | <del></del>            | OR          | X86=           |                        |  |
|   | FINOT PRESE                                    | NTATION OF MU                              | LIPLE DEP         | ENDENT                                | CLAIM                  |                                  |    | +145=        |                        | OR          | +290=          |                        |  |
|   |  |  |                   |                                       |                        |                                  | Ļ  | TOTAL        |                        | L           | TOTAL          |                        |  |
|   | •  |  |                   | ·                                     |                        |                                  | AD | DIT. FEE     |                        | OR A        | DDIT. FEEL     |                        |  |
|   |  | (Column 1) CLAIMS                          | ·                 | (Column                               |                        | (Column 3)                       |    |              | •                      |             |                | 4                      |  |
| MEN   |  | REMAINING<br>AFTER<br>AMENDMENT            | ·                 | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R                      | PRESENT<br>EXTRA                 |    | RATE         | ADDI-<br>TIONAL<br>FEE | ſ           | RATE           | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *  | Minus             | **                                    |                        | =                                |    | X\$ 9=       |                        | OR          | X\$18=         |                        |  |
|   | Independent                                    |  | Minus             | ***                                   |                        | =                                |    | X43=         |                        |             | V06-           |                        |  |
| 1   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                   |                                       |                        |                                  | H  | A43=         |                        | OR          | X86=           |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |  |                   |                                       |                        |                                  |    |              |                        | OR          | +290=          |                        |  |
| (1  | the "Highest Nun                               | ADI  | TOTAL<br>DIT. FEE |                                       | OR A                   | TOTAL<br>DDIT. FEE               | Ţ. |              |                        |             |                |                        |  |
| T   | he "Highest Numi                               | nber Previously Pai<br>ber Previously Paid | For (Total or     | SPACE is le<br>Independent            | ess than<br>) is the h | 3, enter "3."<br>ighest number ( |    |              | opriate box            |             |                |                        |  |